

Open Enrollment Starts Wednesday for Delaware's Health Insurance Marketplace

NEW CASTLE (Oct. 31, 2017) – With the open enrollment period for Delaware's Health Insurance Marketplace cut in half from 12 weeks to six weeks, Delawareans seeking coverage for 2018 are urged to sign up early beginning Nov. 1 in order to avoid any last-minute rush before the Dec. 15 deadline. Early enrollment is also important because the federal government has announced planned maintenance shutdowns of HealthCare.gov on most Sundays during open enrollment.

The fifth open enrollment period, in which people can renew coverage or sign up for a new plan for 2018, runs from Nov. 1 through Dec. 15, at www.HealthCare.gov. Coverage for enrollees who sign up by Dec. 15 and pay their first month's premium will be effective Jan. 1.

The state will formally mark the Health Insurance Marketplace's fifth enrollment period with a press conference at 2 p.m. Nov. 1 at Westside Family Healthcare's Northeast Wilmington Health Center, 908-B E. 16th St.

"Health insurance is a critical connection to quality health care," Governor John Carney said. "Since the Affordable Care Act was signed into law, Delaware's uninsured rate has been reduced significantly and more people are getting the health care they need. For people who don't have access to health insurance through an employer or another form of coverage, the Health Insurance Marketplace offers them an opportunity to get covered. I urge Delawareans to shop early for a plan, meet with in-person assisters to get help understanding your options and to sign up by December 15th."

Delaware currently has more than 27,000 people enrolled for

coverage through its Health Insurance Marketplace, including 73 percent who re-enrolled for 2017 and 27 percent who were new enrollees.

Earlier this year, Aetna announced it would not sell plans on Delaware's Health Insurance Marketplace for 2018. Enrollees with Aetna plans for 2017 must choose one of seven Highmark Blue Cross Blue Shield of Delaware plans that are available for purchase in 2018 or they will be automatically enrolled in a similar plan offered by Highmark. Enrollees who currently have coverage through Aetna Health or Aetna Life will be notified in writing as to what steps to take to obtain an alternate plan.

In October, Insurance Commissioner Trinidad Navarro announced that the Department of Insurance had approved an average rate increase of 25 percent for 2018. With the premium increase, Delaware is making an extra effort this enrollment season to make sure residents who do not have employer-sponsored health insurance or who are not eligible for public programs such as Medicare, Medicaid, and the Children's Health Insurance Program are aware of the federal tax credits available when they buy private plans through the Health Insurance Marketplace, also known as Obamacare. The tax credits can help reduce the cost of their monthly premiums.

"With the uncertainty in Washington, many people may not realize that they can still get coverage through the Marketplace and that there's still financial help available to help them pay for the plan they choose," said Dr. Kara Odom Walker, secretary of the Delaware Department of Health and Social Services. "This year, more than 80 percent of Delawareans who have a Marketplace plan are receiving tax credits to lessen the costs of their premiums. It's important that enrollees with a current Aetna plan go to [HealthCare.gov](https://www.healthcare.gov) or make an appointment with an assister who can help walk them through their enrollment options. I urge anyone who needs high-quality, affordable health insurance to go to

HealthCare.gov to shop for a plan, and I encourage those who are already enrolled to go back to the website, update their information and pick a plan that meets their health needs and budget.”

“Every American ought to have access to quality affordable health care,” said Insurance Commissioner Trinidad Navarro. “Despite the Affordable Care Act’s challenges and the uncertainty in Washington, D.C., consumers should not be discouraged. As a result of Obamacare, more Delawareans are now insured and receiving the health care not only that they need, but that they deserve. Last year Delaware continued its high participation rate on the Marketplace and achieved a 95 percent insured rate throughout the state. Open enrollment is an opportunity to build on these advancements. Because enrollment has been shortened, the Department of Insurance encourages consumers to enroll as early as possible and to consult navigators and other enrollment assisters to select the most cost-efficient plans that offer the greatest quality of services and coverage.”

Consumers can go to HealthCare.gov now to check out their options for 2018. Individuals who need help enrolling in coverage will have access to free in-person assistance from federally funded and trained specialists at several Delaware organizations, including Westside Family Healthcare, Chatman LLC, Henrietta Johnson Medical Center and La Red Health Center.

State-licensed insurance agents and brokers are also available to help individuals re-enroll and to help employers update their coverage, at no extra charge.

For more information, go to www.ChooseHealthDE.com. You can enroll in marketplace coverage at www.HealthCare.gov or by calling 1 (800) 318-2596 (TTY: 1 855 889-4325).

According to the U.S. Department of Health and Human Services:

- Eight-one percent of Delaware's current Marketplace enrollees receive financial assistance to help pay their monthly premiums and/or deductibles and co-pays.
- The current average monthly premium in Delaware is \$569, with an average tax credit among all enrollees of \$338 per month. For the 81 percent of Delawareans who currently receive financial assistance, the average premium after tax credit is \$162 per month.
- Among the more than 27,000 current enrollees, 73 percent are re-enrollees and 27 percent are new enrollees for 2017.
- Financial help is available for individuals with annual incomes up to \$47,520; for a family of four the income limit is \$97,200.
- More than half of all current Delaware enrollees signed up during two weeks in 2017, Dec. 11-17 and Dec. 18-24.

For 2018, Highmark Blue Cross Blue Shield of Delaware will offer a total of seven plans for individuals – one gold plan, three silver, two bronze and one catastrophic. Two insurers – Delta Dental of Delaware, Inc. and Dominion Dental Services, Inc. – will offer a collective 12 stand-alone dental plans, six with a low actuarial level (70 percent) and six with a high actuarial level (85 percent).

All plans cover essential health benefits such as coverage of pre-existing conditions, outpatient care, emergency services, hospitalization, prescription drugs, mental health and substance use disorder services, lab services, and pediatric services.

The three metal-level categories – bronze, silver and gold – are based on how enrollees choose to split the costs of care with their insurance company. Bronze plans have low monthly premiums but high costs when you need care; gold plans have high premiums but lower costs when you need care.

Tax credits are especially beneficial to consumers who pick the second-lowest cost silver plan, since the credits adjust

to match any changes in premium. In a silver plan, the insurer pays about 70 percent of medical costs and the consumer pays about 30 percent, up to a maximum annual out-of-pocket cap of \$7,350 for an individual and \$14,700 for a family.

Consumers who pick silver plans might also qualify for additional savings through discounts on deductibles, copayments, and coinsurance. In Delaware, about 45 percent of current enrollees qualify for cost-sharing reductions.

Penalty for going without coverage

Individuals who can afford coverage but who choose not to buy are expected to pay a penalty equal to the higher of these amounts: 2.5% of your annual household income or \$695 per person (\$347.50 per child under 18). For 2017, the maximum penalty will not exceed \$2,085 per household. In addition to the penalty, consumers will be responsible for the total cost of health expenses they incur.

Consumers can estimate their penalty using the penalty calculator available on ChooseHealthDE.com.

Delaware's senators and U.S. representative urged uninsured Delawareans to find out what's available for them on the Marketplace.

"I encourage everyone to use the Marketplace open enrollment period to get their free help from navigators up and down the state and review their options for coverage in 2018," said U.S. Sen. Tom Carper. "Tax credits are available to help cover the cost of the premium, and some may find out they are eligible for Medicaid. Despite partisan politics down in Washington, the Affordable Care Act is still the law of the land, so don't delay in getting covered."

"Open enrollment is a great opportunity for Delaware families to shop around in the Health Insurance Marketplace and find a plan that works best for them," Sen. Chris Coons said.

“Whether you have insurance already or not, I encourage all Delawareans to visit [HealthCare.gov](https://www.healthcare.gov) and explore plans and financial assistance that may be available to them. While we have more work ahead to improve the ACA and bring down overall health care costs, open enrollment is an important opportunity for families to get the comprehensive health care they need, regardless of age, background, or pre-existing conditions.”

“As families budget for 2018, the beginning of health care open enrollment marks the time to shop around, research what discounts may be available, and select coverage for the upcoming year,” said Rep. Lisa Blunt Rochester. “The health care exchanges are a valuable resource for all families in accessing quality care, and a number of Delaware families may qualify for financial assistance in meeting their insurance costs. With a shortened open enrollment period this year, I recommend all Delawareans visit [ChooseHealthDE.com](https://www.choosehealthde.com) to get more information about what plans are available to meet their family’s needs and to find out how to take advantage of free, in-person help to navigate the health care marketplace.”

Businesses with 50 employees or fewer can offer plans to their employees starting any month of the year through the Small Business Health Options Program (SHOP). Go to [HealthCare.gov](https://www.healthcare.gov) or call 1 (800) 706-7893 (TTY: 711).

In addition to the Health Insurance Marketplace, some residents might be eligible for coverage through Delaware’s expanded Medicaid program, which is open year-round. More than 10,000 Delawareans have received coverage under the Medicaid expansion. To be screened for or to apply for Medicaid benefits, go to Delaware ASSIST.

Delaware’s uninsured population decreased from 10 percent in 2008 to 5.7 percent in 2016, according to a recent Census Bureau report. That decline includes Delawareans who could not get coverage before the Affordable Care Act because of pre-existing conditions. Increasing access to health care coverage

is the first step toward a healthier Delaware, Secretary Walker said. "Through our work on a health care spending benchmark for Delaware linked to the state's economy, we are striving to ensure that our health care system delivers quality care, produces better health outcomes, slows the growth of health care spending and enhances the experience of health care providers."

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The Department of Health and Social Services is committed to improving the quality of the lives of Delaware's citizens by promoting health and well-being, fostering self-sufficiency, and protecting vulnerable populations.